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29177 7590 05/25/2004

BELL, BOYD & LLOYD, LLC
P. O. BOX 1135
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Renee Street	(Depositor's name)
	(Signature)
August 23, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/931,544	08/16/2001	Lutz Rapp	112740-622	3251

TITLE OF INVENTION: METHOD AND ARRANGEMENT FOR COMPENSATING FOR CROSS PHASE MODULATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/25/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CUNNINGHAM, STEPHEN C	3663	359-337000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Bell, Boyd & Lloyd LLC

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Siemens Aktiengesellschaft

Muenchen, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies 3

- ☒ A check in the amount of the fee(s) is enclosed.
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

August 23, 2004

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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08/27/2004 DENMANU2 00000108 09931544

01 FC:1501

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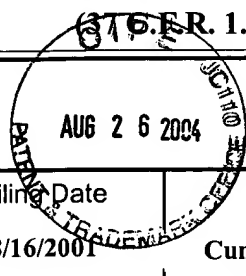
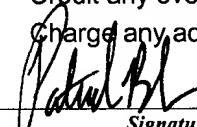

02 FC:1504

300.00 OP

03 FC:8001

9.00 OP

TRANSMIT THIS FORM WITH FEE(S)

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 C.F.R. 1.311)				Docket No. 112740-622	
Applicant(s): Lutz Rapp					
					
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
09/931,544	8/16/2001	Cunningham, Stephen C.	29177	3663	3251
Invention: METHOD AND ARRANGEMENT FOR COMPENSATING FOR CROSS PHASE MODULATION					
Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith are the following for the above-identified application.					
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85					
<input type="checkbox"/> Utility Fee: _____ <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____					
<input checked="" type="checkbox"/> Publication Fee: \$ 300.00					
<input checked="" type="checkbox"/> A check in the amount of \$1,639.00 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-1818 as described below.					
<input type="checkbox"/> Charge the amount of _____					
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Patrick B. Law Reg. No. 41,549 Bell, Boyd & Lloyd LLC P.O. Box 1135 Chicago, Illinois 60690-1135					
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I certify that this document and fee is being deposited August 23, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner Patents, P.O. Box 1450, Alexandria, VA 22313-1450. <div style="text-align: center; padding: 20px;">  </div> Signature of Person Mailing Correspondence Renee Street _____ Typed or Printed Name of Person Mailing Correspondence					